

CIVIL DISTRICT COURT ANNOUNCEMENT FORM

THIS FORM MUST BE **FILLED OUT IN FULL** AND **RECEIVED NO LATER THAN 5:00 P.M. ON WEDNESDAY OF THE WEEK PRIOR** IN ORDER FOR THE ANNOUNCEMENT TO BE PROCESSED. ANNOUNCEMENT MUST BE E-MAILED TO: **TC.CivilDistrictAnnounce@traviscountytexas.gov**

Date and Time of Setting: _____; Cause Number: D-1- ____ - ____ - _____

Case Style: _____

Nature(s) of Hearing(s)/Trial(s) that are set: _____

Name/Contact Information for any interpreter appearing on this setting: _____

Time Estimate (**TOTAL TIME FOR ENTIRE HEARING OR TRIAL**): _____

For Jury docket cases and Family and Civil Monday Long docket cases only:

Has Alternative Dispute Resolution (ADR) been completed or waived by the Court?:

Yes: _____; No: _____ (If Not, Reason? _____)

FOR FAMILY LAW CASES ONLY:

Is/Are Hearing(s) Still Necessary?: Yes: _____; No: _____

(If no, provide reason: _____)

District Judge being requested?: Yes: _____; No: _____

Has an Agreement been filed waiving right to De Novo?: Yes: _____; No: _____

Request for Record to be made of Proceeding?: Yes: _____; No: _____

*******ONLY Jury Trials/Long Docket Bench trials or Family Long Docket settings answer this section:**

****All parties have conferred and:**

_____ I certify that all parties and attorneys agree to appear IN PERSON and are jointly requesting to appear IN PERSON for this contested proceeding if the Court is able to accommodate this request.

Signature

Date signed

(PLEASE NOTE THAT THE COURT WILL ADVISE ON HOW THE HEARING WILL PROCEED PRIOR TO THE HEARING.)

CONTACT INFORMATION IS REQUIRED FOR ALL CIVIL AND FAMILY CASES:

Party Making Announcement: _____

(Specify party type (i.e. Plaintiff/Defendant ; Petitioner/Respondent) **and** Party Name)

Announcing Attorney / Self-Represented Litigant:

Name: _____;

State Bar # (if applicable): _____;

Contact E-Mail Address: _____&

Contact Phone Number: _(____)_____ ; Alternate: _(____)_____

Opposing Counsel / Self-Represented Litigant:

Name: _____;

Contact E-Mail Address: _____&

Contact Phone Number: _(____)_____ ; Alternate: _(____)_____

Other Parties / Attorneys

Name: _____;

Contact E-Mail Address: _____&

Contact Phone Number: _(____)_____ ; Alternate: _(____)_____

Other Parties / Attorneys

Name: _____;

Contact E-Mail Address: _____&

Contact Phone Number: _(____)_____ ; Alternate: _(____)_____